

ISSUE SLIP STAPLE ABOVE (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|----------|
| FEE DETERMINATION | W | 21534 | 11-23-99 |
| O.I.P.E. CLASSIFIER | | 16 | 11-29-99 |
| FORMALITY REVIEW | | 204477 | 12-15-99 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|----------|
| 1 | ✓ | ✓ | 3/22/00 |
| 2 | | ✓ | 8/20/02 |
| 3 | | ✓ | 3/24/01 |
| 4 | | ✓ | 5/22/07 |
| 5 | | ✓ | 11/26/01 |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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